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## BIB DATA SHEET

CONFIRMATION NO. 6417

<b>SERIAL NUMBER</b> 10/571,469	<b>FILING or 371(c) DATE</b> 03/13/2006 <b>RULE</b>	<b>CLASS</b> 434	<b>GROUP ART UNIT</b> 1649	<b>ATTORNEY DOCKET NO.</b> 286808US0PCT		
<b>APPLICANTS</b> Frank Mattner, Wien, AUSTRIA; Walter Schmidt, Wien, AUSTRIA; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/AT04/00311 09/13/2004 <b>** FOREIGN APPLICATIONS *****</b> AUSTRIA A 1444/2003 09/12/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 10/23/2006						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/DANIEL E KOLKER/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> AUSTRIA	<b>SHEETS DRAWINGS</b> 3	<b>TOTAL CLAIMS</b> 4	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> OBLON, SPIVAK, MCCLELLAND MAIER & NEUSTADT, L.L.P. 1940 DUKE STREET ALEXANDRIA, VA 22314 UNITED STATES						
<b>TITLE</b> Methods of Treating Alzheimer's Disease With an Apheresis Device						
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		